

REQUIRES MONITORING
OR STAFF ACTION _____

COMMISSION DIRECTIVE

| | | | |
|------------------------|-------------------------------------|------------|-------------------------|
| ADMINISTRATIVE MATTERS | <input type="checkbox"/> | DATE | <u>October 12, 2005</u> |
| MOTOR CARRIER MATTERS | <input type="checkbox"/> | DOCKET NO. | <u>2005-191-E</u> |
| UTILITIES MATTERS | <input checked="" type="checkbox"/> | | _____ |

SUBJECT:

DOCKET NO. 2005-191-E - Generic Proceeding to Explore a Formal Request for Proposal for Utilities that are Considering Alternatives for Adding Generating Capacity – Discuss with the Commission a Motion to Substitute Counsel Filed by Darra W. Cothran, Esquire, on Behalf of LS Power Associates, L.P.

COMMISSION ACTION:

Grant Motion to Substitute Counsel.

| | | | |
|-----------|-------------------------------------|-------------------------------------|--------------------------|
| PRESIDING | <u>Mitchell</u> | Session: | Regular |
| | | Time of Session | <u>2:30 PM</u> |
| | MOTION | YES | NO |
| | | | OTHER |
| CLYBURN | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| FLEMING | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| HAMILTON | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| HOWARD | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| MITCHELL | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| MOSELEY | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| WRIGHT | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

| | |
|----------------------|----------------|
| APPROVED | _____ |
| APPROVED STC 30 DAYS | _____ |
| ACCEPTED FOR FILING | _____ |
| DENIED | _____ |
| AMENDED | _____ |
| TRANSFERRED | _____ |
| SUSPENDED | _____ |
| CANCELED | _____ |
| SET FOR HEARING | _____ |
| ADVISED | _____ |
| CARRIED OVER | _____ |
| RECORDED BY | <u>DESANTY</u> |